

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	M.P.		01-18
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	Dr	32	6/26
FORMALITY REVIEW	TZ	947	08/10/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
1	10/18/01
2	11/14/01
3	11/14/01
4	11/14/01
5	11/14/01
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8	11/14/01
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50	11/14/01

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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10/18/01  
10/18/01